



REFUND BENEFICIARY DESIGNATION

Please check one:

☐ New Form☐ Change in Existing Information

Refund Beneficiary Designation - Please Print Clearly

If I die and no pension is payable under the PERA Act, I designate the person named below as my refund beneficiary to receive the refund of my member contributions.

Name _____ Social Security No. _____

Relationship _____ Date of Birth _____

Beneficiary's Address _____ Phone Number _____

City _____ State _____ Zip Code _____

If you are married and wish to designate someone other than your spouse as the refund beneficiary, the spousal consent below **must be signed by him/her**.

The first five (5) years of employment and service credit are the most important to have a **REFUND BENEFICIARY** designation on file at PERA. Under the statute, if you have less than five years of service credit and if your death is not "duty related" (that is, from a job related injury or illness), that is when your contributions are refunded in a lump sum. If you have not named a refund beneficiary, the amount will be paid to your estate.

Spousal Consent

I, _____ spouse of _____, consent to his/her

decision to designate _____ as a refund beneficiary.

Signature of Member's Spouse _____ Date: _____

I hereby declare that all the information provided is true and complete to the best of my knowledge and that the spousal signature (if signed) is the signature of my spouse.

Member's Signature _____ Social Security No. _____

Member's Name (please print) _____ Date _____

Address: _____ Phone Number: _____

Marital Status: Married ☐ Single ☐ Divorced ☐ Widowed ☐

Marriage or divorce after the date of this designation will effect this designation. You will need to call PERA in the event either happens.

State of New Mexico)
County of) SS:

Subscribed and sworn to before me by _____ on this _____ day of _____, _____.

My commission expires:

Notary Public

BDR01